

Foster Family Home - Corrective Action Report

Provider ID: 2-140078

Home Name: Edgar Chua Bartolome, CNA

Review ID: 2-140078-3

28-2884 Kaakepa Street

Reviewer: Carol Copeland

Pepeekeo HI 96783

Begin Date: 11/8/2017

End Date: 11-09-17

Foster Family Home

Required Certificate

[17-1454-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Home visit survey performed to recertify two client home. Home in compliance on day of survey. Corrective Action Report issued with no plan of correction due to CTA. Home is eligible for a two year recertification for two clients.

Carol Copeland MSN

Compliance Manager

E. C. Bartolome

Primary Care Giver

11-8-17

Date

11/08/17

Date